## PART B - FEE(S) TRANSMITTAL

Complete and send this form, togethe. .th applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

				or <u>Fax</u> (5	71)-273-2885			
INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notificat	form should be used correspondence including d below or directed of ions.	for training the	Patent, advance of in Block I, by (	UE FEE and PUBLICA' rders and notification of a) specifying a new corr	FION FEE (if requirements fees very condence address	ired). I vill be and/o	Blocks 1 through 5 s mailed to the current r (b) indicating a sep	should be completed when correspondence address a arate "FEE ADDRESS" fo
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for my change of address)  Note: A certificate of mailing case only be used for Anomatic mail Fee() Transmittal. It is certificate cases and for my others proper. Each additional paper, such as an assignment or formal draw have its own certificate of mailing or transmit.								
25670	25670 7590 02/26/2007						r, such as an assignmental side of the contract of the contrac	ent or formal drawing, mus
WILLIAM L. F 4880 STEVENS SUITE 201	ARADICE, III CREEK BOULEV			Certificate of Malling or Transmission I hereby certify that life Fe(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimal transmitted to the USPTO (371) 273-2885, on the date incideated beginned to the Computer of the				
SAN JOSE, CA	95129							(Depositor's name)
								(Signature)
				L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVE		TOR		RNEY DOCKET NO.	CONFIRMATION NO.
10/773,591 02/06/2004 TITLE OF INVENTION: SEGMENTED CONTENT ADDRESSABLE N				Jose P. Pereira				
				IEMORY ARRAY AND	PRIORITY ENCOI	DER		
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1400	\$0	\$0		\$1400	05/29/2007
EXAMINER			ART UNIT	CLASS-SUBCLASS				
PEIKARI, I		2189	711-108000	_				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.83).   Change of correspondence address for Change of Correspondence Address for PIC/SB 1/23 Lauched.   "Fee Address" indication (or "Fee Address" indication form FTO/SB 1/23 Lauched.   The Address of the PIC/SB 1/23 Lauched.   "Rev Address" indication (or "Fee Address" indication form FTO/SB 1/3 Lauched.   Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively or (2) the name of a single firm (having a s n emphor a (2) the man of a single firm (having a s n emphor a (3) the single firm (having a s n emphor a (4) registered patent attorneys or agents. If no name is intect, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE NetLogic Microsystems, Inc.				(B) RESIDENCE: (CITY and STATE OR COUNTRY)  Mountain View, California 94043				
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔯 Corporation or other private group entity								
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				<ul> <li>b. Psyment of Fec(s): (Please first reapply any previously paid issue fee shown above)</li> <li>□ A check is enclosed.</li> <li>□ Psyments by credit eard. Form PTO-2038 is attached.</li> <li>☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _501914</li></ul>				
	SMALL ENTITY statu	s. Scc	37 CFR 1.27.	☐ b. Applicant is no lo	nger claiming SMA	LL EN	TITY status, See 37 C	FR 1.27(g)(2).
interest as shown by the re	Publication Fee (if requestords of the United Sta	aired) v tes Pat	vill not be accepted ent and Trademark	d from anyone other than Office.	the applicant; a regi	stered	attorney or agent; or t	he assignee or other party in
Authorized Signature					Date A	pri/	9,200	7
	William L. Parad			Registration N				
This collection of informs an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tion is required by 37 C ality is governed by 35 application form to the ms for reducing this bur ginia 22313-1450. DO 3-1450.	FR 1.3 U.S.C. USPT den, sl NOT	11. The informatic 122 and 37 CFR O. Time will vary sould be sent to the SEND FEES OR (	on is required to obtain or 1.14. This collection is educated the depending upon the indi- ed chief Information Offic COMPLETED FORMS T	retain a benefit by t stimated to take 12 revidual case. Any co ber, U.S. Patent and O THIS ADDRESS	he pub ninutes mmen Traden S. SEN	lic which is to file (an is to complete, including is on the amount of ti- nark Office, U.S. Dep D TO: Commissioner	d by the USPTO to process ing gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.